BEST AVAILABLE COPY

| PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000 | | | | | | | | | Application or Docket Number 9/8/79/30 | | | | | |
|---|--|---|-----------------------------|--------------------------------|--------------|------------------|-------------------|----------------|--|------------|---------------------|------------------------|--|--|
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | SMALL ENTITY TYPE | | | OTHER THAN | | | | |
| TOTAL CLAIMS | | | 22 | | (Goldmir Z) | | | ATE | | OR 1 | SMALL | | | |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | _ | IC FE | FEE | 1 | RATE | FEE | | |
| TOTAL CHARGEABLE CLAIMS | | | 2 2 minus 20= | | • 2 | | - | | 355.00 | 1 | BASIC FEE | | | |
| INDEPENDENT CLAIMS | | | 2 minus 3 = | | . 2 | | <u> </u> | X\$ 9= X40= | | OR | X\$18= | 36 | | |
| ML | ILTIPLE DEPEN | NDENT CLAIM P | RESENT | | | | A+02 | | | OR | X80= | | | |
| • 11 | the difference | in column 1 is | ess than zero, enter "0" in | | | column 2 | +135= | | | OR | +270= | | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | TC | TAL | | OR | TOTAL | 구당시 | | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | SN | ALL | ENTITY | OR | OTHER SMALL I | | | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | Francis de la compania | HIGH NUM PREVIO PAID | BER | PRESENT EXTRA | R/ | TE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | |
| | Total | . 22 | Minus | | 2 | = - | X | 9= | 1 | OR | X\$18= | | | |
| | Independent | NTATION OF MI | Minus | | 3 | = | X | 0= | / | OR | X80= | | | |
| | | | JETH EL OLI | CIVOCIVI | CLATIV | | +1 | 35= | 17 | OR | +270= | | | |
| | | | | | | | ADDI" | OTAL | | OR | TOTAL | | | |
| _ | 12,20,0 (column 1) (Column 2) (Column 3) | | | | | | | | | • | | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUMI PREVIO PAID | BER DUSLY | PRESENT EXTRA | RA | TE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | |
| | Total | . 18 | Minus | . 2 | 2 | = 0 | X\$ | 9= | | OR | X\$18= | | | |
| | Independent FIRST PRESE | NTATION OF ML | Minus JLTIPLE DEF | ENDENT | CLAIM | = <i>()</i> | X4 | 0= | | OR | X80= | | | |
| | | | | LINDEITI | OD IIII | | +1: | 35= | | OR | +270= | | | |
| | | | | | | | ADDIT | OTAL FEE | | OR | TOTAL ADDIT. FEE | | | |
| | | (Column 1) | | | | | | | | | | | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | PREVIO PAID | BER DUSLY | PRESENT EXTRA | RA | TE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | |
| | Total | • | Minus | •• | | = | X\$ | 9= | | OR | X\$18= | | | |
| | Independent | AITATION OF AU | Minus | THO ENT | | - | X4 | 0= | | OR | X80= | | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | | | | | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." | | | | | | | | | | OR | +270= TOTAL | | | |
| ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE | | | | | | | | | | | | | | |
| | agnest Num | wai Fraviousiy Pali | urui (10181 01 | ingebende | an) is the | rignest number | tound in | ne ap | propriate box | in colu | umn 1. | | | |